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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

		For Oth	er inan An	Autnorize	ea Comm	ittee		Office Use	Only	
1.			MAILING LAND OR PRINT		cample:If typi er the lines	ng, type		• • • •		
L	American Medical Response F	Political A	ction Committe	e 						
Ш			1 1 1 1							
AD	DRESS (number and street)	6200 S	S Syracuse Wa	y, Suite 200						
	Check if different than previously reported. (ACC)	Greenv	wood Village				CO	801	11	
2.	FEC IDENTIFICATION NUMBER	BER 1	_	CITY 🛋			STATE	Z	IPCODE	A
	C00389585			3. IS THIS REPOR	г	NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Q1) R	Monthly Report Due On:	Feb 20 (M2 Mar 20 (M3 Apr 20 (M4	3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	:	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	De (No Yea	v 20 (M11) on-Election ar Only) c 20 (M12) on-Election ar Only)
	July 15 Quarterly Report(Q2) October 15 Quarterly Report(Q3)) 12-Day PRE-Election Report for t		Primary (1		=	ral (12G) al (12G)	Ru	noff (12R)
	January 31 Quarterly Report(YE	≣)		Election on	L,				n the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)	ı (d	Post -Elect Report for t		General (3	50G)	Runo		Spon the State of	ecial (30S)
5.	Covering Period 0 2	0	1 200	9	through	0 2	28	2009		
	ertify that I have examined this R be or Print Name of Treasurer		to the best of ravid Buckley	ny knowledge	e and belief it	is true, correct	and comple	ete.		
Sig	nature of Treasurer Electron	ically Filed	d by Mr Davi	d Buckley			Date (10	20	0 9
NO	TE : Submission of false, erron	eous, or ir	ncomplete infor	mation may s	ubject the pe	erson signing th	is Report to	the penalties o	f 2 U.S.C 4	437g.
	Office Use							I	FORM 3	3X

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Medical Response Political Action Committee [®] D ^b D 0 2 0.2 28 0 1 2009 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2009 54357.14 January 1 (b) Cash on Hand at 56295.87 Begining of Reporting Period 2683.76 6622.49 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 58979.63 60979.63 6(a) and 6(c) for Column B) 6000.00 8000.00 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 52979.63 52979.63 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Medical Response Political Action Committee

0 1 2^D8 м м 0 2 2009 0 2 M 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2153.77 1038.42 (i) Itemized (use Schedule A) 1645.34 4468.72 (ii) Unitemized (iii) TOTAL (add 2683.76 6622.49 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 2683.76 6622.49 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 2683.76 6622.49 12, 13, 14, 15, 16, 17, and 18(c))

2683.76

6622.49

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	6000.00	8000.00
Independent Expenditure (vac Schodule E)	0.00	0.00
(use Schedule E)		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
Than Political Committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))		
9. Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
I. Total Disbursements (add Lines 21(c), 22		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6000.00	8000.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	2000.00	0000 00
from Line 31)	6000.00	8000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	2683.76	6622.49	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	2683.76	6622.49	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

FE6AN026

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 8 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Medical Response Politica	I Action Committee	
Full Name (Last, First, Middle Initial)		
Louis K. Meyer		Date of Receipt
Mailing Address 10644 N. Oakwilde A		02 28 7 2009
City	State Zip Code	Transaction ID: PR1364413821461
Stockton	CA 95212-9246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer EMS MGMT LLC	Occupation VP Senior - EMSC	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	961.50	P/R Deduction (\$192.30 Bi- Weekly)
Full Name (Last, First, Middle Initial) Kurt W. Williams		Date of Receipt
Mailing Address Po Box 420400		02 28 2009
City	State Zip Code	Transaction ID: PR1364670721461
San Diego	CA 92142-0400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.38
Name of Employer American Medical Response of Southern	Occupation COO II Divisional Over200M	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	288.45	P/R Deduction (\$57.69 Bi- Weekly)
Full Name (Last, First, Middle Initial) Kimberly Norman		Date of Receipt
Mailing Address 10331 Royal Eagle L	ane	02 28 2009
City	State Zip Code	Transaction ID: PR1364751721461
Highlands Ranch	CO 80129-6283	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.38
Name of Employer EMS MGMT LLC	Occupation VP Senior Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	288.45	P/R Deduction (\$57.69 Bi- Weekly)
		615.36

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/8 (check only one) X 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Medical Response Politi	n for the purpose of soliciting contributions solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) Roylene A. Rhodes		Date of Receipt			
Mailing Address 19748 E Pinewood	0 2 2 8 2 0 0 9				
City Centennial	State Zip Code CO 80016-3880	Transaction ID: PR1365144721461 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	115.38			
Name of Employer EMS MGMT LLC	Occupation VP Business Development				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	P/R Deduction (\$57.69 Bi- Weekly)			
Full Name (Last, First, Middle Initial) Steven G. Murphy		Date of Receipt			
Mailing Address 100 S Birch Road	Mailing Address 100 S Birch Road # 901a				
City Fort Lauderdale	State Zip Code FL 33316-1540	Transaction ID: PR1365147921461			
FEC ID number of contributing federal political committee.	FL 33316-1540	Amount of Each Receipt this Period 192.30			
Name of Employer EMS MGMT LLC	Occupation VP Senior Government Relations				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	P/R Deduction (\$96.15 Bi- Weekly)			
Full Name (Last, First, Middle Initial) Randall L. Strozyk		Date of Receipt			
Mailing Address 9209 181st Ave E	02 28 2009				
City	State Zip Code	Transaction ID: PR1365275521461			
Bonney Lake FEC ID number of contributing federal political committee.	WA 98391-7187	Amount of Each Receipt this Period 115.38			
Name of Employer American Medical Response Ambulance Se	Occupation COO I Divisional Under200M				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	P/R Deduction (\$57.69 Bi- Weekly)			
SUBTOTAL of Receipts This Page (option	al)	423.06			
TOTAL This Period (last page this line nun	haber calls)	1038.42			

A.

В.

001150111507			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 8/8
ITEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem			
or for commercial purposes, other than using the name	and address of any political	committee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full)			
American Medical Response Political Action	n Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 29465034
Grassley Committee Inc			Date of Disbursement
Mailing Address PO Box 1000			$\begin{bmatrix} 0 & 2 & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
Maining / Red roots T O Box 1000			
,	State Zip Code		Amount of Each Disbursement this Period
Des Moines	IA 50304		1000.00
Purpose of Disbursement			1000.00
Candidate Name		011	
Sen. Charles Grassley		Category/ Type	
· · · · · · · · · · · · · · · · · · ·	ment For: 2010	. , po	
· —	Primary General		
President	Other (specify)		
State: IA District:			
Full Name (Last, First, Middle Initial)			Transaction ID: 29491576
Friends of Schumer			Date of Disbursement
Mailing Address 509 Madison Avenue; Su	ito 1002		$ \begin{bmatrix} 0 & 2 \\ 0 & 2 \end{bmatrix} $
Maining / Mainin	1802		
	State Zip Code		Amount of Each Disbursement this Period
	NY 10022		5000.00
Purpose of Disbursement		044	5000.00
Candidate Name		O11	
Charles Schumer		Category/ Type	
Office Sought: House Disburse	ment For: 2010		
X Senate X	Primary General		
President	Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	•	6000.00
TOTAL This Period (last page this line number only)	•	6000.00

State: NY

District: